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Abstract 707

TITLE: HIV Risk Behavior in Gay and Bisexual Men in New York City

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BACKGROUND AND OBJECTIVES: A number of large scale studies in other cities have suggested that 40%-50% of gay men engage in HIV sexual risk behaviors over the course of a year. We examined specific HIV sexual risk behavior in a large and ethnically diverse sample of gay and bisexual men in New York City.

METHODS: This was a cross sectional, self-report survey of 7,650 gay and bisexual men. Recruitment was via convenience sampling at 23 gay identified venues (pride marches, gay identified beaches, restaurants, neighborhoods, events, etc.). Descriptive statistics were computed, and ANOVAs and x^2 calculated to examine behavioral differences by ra ce and age.

RESULTS: The sample was 56% white, 19% black, 18% Latino, 3% Asian/PI, and 4% other race/ethnicity. The self reported HIV-seropositivity rate was 17% among blacks, 15% Latinos, 13% whites, 2% Asian/PIs. However, Asian/FIs were more likely a to have tested for HIV (19%, versus 12% blacks, 9% whites, 9% Latinos). More than a quarter of whites (28%) reported >10 male sex partners in the past year, versus 23% Asian/PIs, 17% Latinos, and 11% blacks. There were no significant racial/ethnic differen ces in unprotected anal intercourse in the past year (39% to 45% across groups). However, whites who engaged in UAI were most likely to report only 1 insertive (74%) and 1 receptive (69%) UAI partner, versus blacks (63%, 57%), Latinos (67%, 65%) and Asian/PIs (67%, 71%). Whites who engaged in UAI were also most likely to report that all their UAI partners were HIV-seroconcordant (75% versus 69% blacks, 66% Asian/PIs, 64% Latinos). Asian/PIs who engaged in UAI with partners of opposite or unknown serostatus were most likely to report being HIV-negative (77%), versus 63% whites, 48% blacks, 48% Latinos.

CONCLUSIONS: Though approximately two in five men reported UAI in the past year, most men limited UAI to a single partner, and to partners they believed were of the same HIV-serostatus. Though white gay/bisexual men had the most sexual partners, they were no more likely to report UAI, and more likely to limit UAI to 1 partner and partners of perceived HIV-seroconcordant status. Blacks and Latinos who engaged in UAI with partners of opposite or unknown serostatus were more likely to report being HIV-seropositive. Clearly, gay men are engaging in negotiated safety, and preventing HIV transmission requires a refined understanding of partners and serostatus than simple reports of UAI.

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